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## APPLICANTS

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\*\* CONTINUING DATA *None* \*\*\*\*\*\*\* FOREIGN APPLICATIONS *None* \*\*\*\*\*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

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Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Examiner's Signature _____ Initials _____	STATE OR COUNTRY WA	SHEETS DRAWING 8	TOTAL CLAIMS 20	INDEPENDENT CLAIMS 4
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## TITLE

Quick release tool mounting bracket

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